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JAN 10 2005 Atty Docket No. 021919-001110US

PTO FAX NO.: (703) 872-9306

ATTENTION: Examiner Carolyn T. Blake

Group Art Unit 3724

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Carolyn T. Blake

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of Kevin L. Corcoran, et al., Application No. 10/695,631, filed October 27, 2003 for PORTABLE PUNCH SYSTEM are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form; and
2. Response to Restriction Requirement.

Number of pages being transmitted, including this page: 7

Dated: January 10, 2005


Jeanette Olivera

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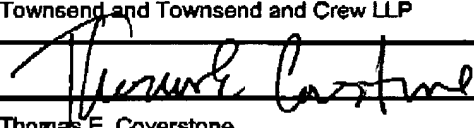
TOWNSEND and TOWNSEND and CREW LLP
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San Francisco, CA 94111-3834
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60395604 v1

PTO/SB/21 (09-04)

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/695,631	
	Filing Date	October 27, 2003	
	First Named Inventor	Corcoran, Kevin L.	
	Art Unit	3724	
	Examiner Name	Carolyn T. Blake	
Total Number of Pages in This Submission	6	Attorney Docket Number	021919-001110US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Restriction Requirement
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Thomas E. Coverstone		
Date	January 10, 2005	Reg. No.	36,492

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. (703) 872-9308 on January <u>10</u> , 2005.		
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PATENT
Attorney Docket No.: 021919-001110US

TOWNSEND and TOWNSEND and CREW LLP

By: Jeanette Olivera
Jeanette Olivera

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Kevin L. Corcoran, et al.

Application No.: 10/695,631

Filed: October 27, 2003

For: PORTABLE PUNCH SYSTEM

Customer No.: 20350

Confirmation No. 6410

Examiner: Carolyn T. Blake

Technology Center/Art Unit: 3724

RESPONSE TO RESTRICTION
REQUIREMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed December 9, 2004, please enter the
following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this
paper.

Remarks begin on page 4 of this paper.